

Implementing Order Entry
Electronic Medical Record Module







BCH participates in the North Idaho Rural Health Consortium

Through the Consortium, BCH has been working towards an integrated health system to share patient information.

Because of high cost, we've been doing this in increments.



 Order Entry was the primary step in moving toward a more complete electronic medical record system.



Implementing Order Entry

 OE was the foundation for moving forward for the implementation of Bedside documentation, Patient Care and Safety and Medication Verification electronic modules.



Order Entry Functions

- Enter, edit and cancel orders
- Enter and retrieve clinical data
- Transmit charges to financial system
- Generate reports and statistics for care areas and ancillary departments
- View results and reports

Employee Participation

- Involving many departments including Dietary, Lab, Radiology, PT, Cardio pulmonary and Nursing.
- Employee "buy in" was important.
- First step was to get leaders on board.
- Our DNS, Marie Ross, took the lead to designate "Super Users"



- Super users were trained in Spokane by North Inland Health Services (INHS), the vendor for the contract.
- INHS provided a system analyst who managed the timeline, facilitated meetings, built custom OE dictionaries, trained the core team and super users, and provided support.

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Procedures before Go-Live

- Super users design what they will present to their staff
- Finalize dictionary input compare information between departments
- Testing ensuring systems are "talking to each other"
- Parallel and go-live tests



- Helping to expedite communication between departments
- Improved utilization of time for employee
- At a glance patient information, readily available
- Easily correct patient record
- Using less paper
- Capture charges
- In ER though, taking more time, previously used phone.



Support & Collaboration

There is a strong commitment organized through the North Idaho Rural Health Consortium to work together as a region to further our progress in Health Information Technology

Challenges

The challenge is to find funding sources that enable us to continue to move forward in this endeavor.